C-2 Rev. 11/03

## CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

Name of Candidate or Political Committee and Chairperson Pete Welliver				Office South (if dail) House seat	Aili 7: 133
Mailing Address	Check if address change.	City and Zip		Home Phone	Work Phone
951 Limestone		Idaho Falls 8340	04	208-522-668	
Name of Political Treasurer	<u> </u>				JA TOAHO" L
Lenorah deAngelis					
Mailing Address	☐ Check if address change.	City and Zip		Home Phone	Work Phone
2983 Chaparral Dr.		83404		208-529-585	51
Section II		TYPEOFREPO	RT		
Directions: To indicate the ty	ne of report being filed, f	ill in the appropriate	dates and o	heck the appropria	atc box(es). See the
instructional manual for repor	rting periods and due dat	es.		• • •	
This report	is for the period from _	05 / 09 /	04 thro	ıgh <u>06 / 0</u>	<u> 14 / 04 </u>
-			: Dan	Due Comenal Dom	
☐ 7 Day Pre-Primary Report			☐ 7 Day Pre-General Report		
E3.20T	Day Post-Primary Report		□ 30 T	Day Post-General R	Report
□ 30 L	ay rost-rimary report			<b>,</b> 1000 00000000000000000000000000000000	
□ Octa	ober 10 Pre-General Repo	ort	☐ Ant	ual Report	
	-				
Is this Report a	an amendment? 🛘 🗆 Yes	i ☑ No	Is this a Te	ermination Report?	Yes E No
0 .: III	CTATEMENTOE	NO CONTRIBUTIO	NSOR EX	PENDITURES	
Section III			:		
the appropriate dates and sign	n this report. Be sure to c	arry forward the app	propriate C	alendar rear to Da	
☐ I hereby certify	that I have received no co	ontributions and hav	h/	expenditures durin	
Section IV		SUMMARY			COLLINAIN
To reach your Calendar Year	to Date figure: Add this	report's Column I		COLUMNI	COLUMNII Calendar Year to Date
figures to the Column II figure	res of your previous repor	rt (except on line 6).	1	his Period	Calendar teal to Date
	s met to \$20 audi		S	xxxxxx	\$
Line 1: Cash on Hand Januar		D. J. Jak	\$ \$	2,169.23	s xxxxxx
Line 2: Enter Cash Balance a			\$		\$ 2,320.00
Line 3: Total Contributions (		()	!		\$ 2,320.00
Line 4: Subtotal (Add lines 1			\$	2,169.23	\$ <u>2,320.00</u> \$ 222.27
Line 5: Total Expenditures (Enter amount from page 2)			2 -	71.50	\$ 2.097.73
Line 6: Cash Balance at Clos	e of Period (Subtract line	5 from line 4)**	\$	2.097.73	\$
*This same figure should be **You must report the cash Note that the closing cash b	on hand at both the begin palance for the current re	nning of the reporting porting period appearance	ig period an	ext report as begin	reporting period. ning cash on hand.
Section V	CONTRIBUTIO	NSPLEDGED-INC	URRED EX		
Contributions Pledged d	luring this reporting perio	od but not yet receiv	ed: □No	ne 🗆\$	(see attached Schedule C-2A
Incurred Expenditures				one □\$	(see attached Schedule C-2B
Incurred Expenditures	during this reporting berr	Ou but hot yet paid.			·
	Section VI		ERTIFIC.	ATION	
Return This Report To:					are all a state of the amountained
Ben Ysursa	I	Lenorah de			y certify that the information
Secretary of State	in this reno	rt is a true. complete	e and correc	t Campaign Finan	cial Disclosure Report as
PO Box 83720	required by				
Boise ID 83720-0080	Lyceli .				
fax: (208) 334-2282		<u>Je</u>	usial	) to wer	(ugelis
		Signa	ture of Poli	tical Treasurer	( )

Page 1

## DETAILED SUMMARY PAGE

Name of Candidate or Committee Pete Welliver	Report Covering the Period From 05 / 09 / 04 to 06 / 04 / 04					
UNITEMIZED CO Contributions of Fifty Dollars	NTRIBUTIONS (\$50.00) or Less This Period					
Total Number	Total 0.00 Amount S					
UNITEMIZED EXPENDITURES  Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period						
Total 1 Number	Total 23.00 Amount \$					

		otal This Period
Number of Schedule A pages Attached		
Contributions		
Uniternized Contributions (\$50 and less) from top of page		0.00
Itemized Contributions (total all Schedule A sheets)		
otal Contributions (also enter this figure on page 1, Section IV, line 3)		0.00
Number of Schedule B pages Attached		
Expenditures		
Uniternized Expenditures (less than \$25) from top of page		23.00
Itemized Expenditures (total all Schedule B sheets)	s	48.50
Total Expenditures (also enter this figure on page 1, Section IV, line 5)		71.50

## SCHEDULE B ITEMIZED EXPENDITURES

		_
Page	of	
•••		
	ı	

of Twenty-Five Dollars (\$25.00) or more this period

Name of Candid Pete Welliv	ate or Committee		-
1 Cic Wellv	-	Column A	Column B
Date	Fuil Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
05 , 20 , 04	Whitney Custom Printing 360 E. Street  Idaho Falls, ID 83402	s48.50	s
Purpose of Abo	ve Expenditure: 500 printed postcards		
	2.		
		s	\$
Purpose of Abo	ove Expenditure:		
	3.	s	\$
Purpose of Abo	ve Expenditure:		
	4.	s	s
Purpose of Abo	ove Expenditure:		
	5.	s	s
Purpose of Ab	ove Expenditure:		
//	6.	s	s
Purpose of Abo	ove Expenditure:	La	
	Subtotals of Columns A & B	\$48.50	s0.00
	Total This Page (add columns A & B)		\$48.50